

<b>REQUEST FOR ORAL HEARING BEFORE THE BOARD OF PATENT APPEALS AND INTERFERENCES</b>		Docket Number (Optional) <b>418268001US</b>
In re Application of <b>Smith et al.</b>		
Application Number <b>10/789,805-Conf. #5629</b>	Filed <b>February 27, 2004</b>	
For <b>METHOD AND SYSTEM FOR A SERVICE CONSUMER TO CONTROL APPLICATIONS THAT BEHAVE INCORRECTLY WHEN REQUESTING SERVICES</b>		
Art Unit <b>3689</b>	Examiner <b>C. A. Stroder</b>	

Applicant hereby requests an oral hearing before the Board of Patent Appeals and Interferences in the appeal of the above-identified application.

The fee for this Request for Oral Hearing is (37 CFR 41.20(b)(3)) \$ 1,240.00

☐ Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: \$ \_\_\_\_\_

☐ A check in the amount of the fee is enclosed.

☒ Payment by credit card.


☐ The Director has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.

☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 50-0665.

☐ A petition for an extension of time under 37 CFR 1.136(b) (PTO/SB/23) is enclosed. For extensions of time in reexamination proceedings, see 37 CFR 1.550.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

I am the

☐ applicant/inventor. 
  
 Signature

☐ assignee of record of the entire interest.  
 See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed.  
 (Form PTO/SB/96) 
Maurice J. Pirio  
 Typed or printed name

☒ attorney or agent of record.  
 Registration number 33,273 
March 12, 2012  
 Date

☐ attorney or agent acting under 37 CFR 1.34.  
 Registration number if acting under 37 CFR 1.34. 
(206) 359-8548  
 Telephone number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ \*Total of 1 forms are submitted.